

Unanticipated pregnancies in adolescents can have rippling impacts throughout the life of the mother, child and the extended family. According to the CDC, teens that get pregnant have far poorer outcomes, leading to an increase in costs to the social welfare system, and a reduction for the mother and child in everything from lifetime earning expectancy to academic performance. Oklahoma has the second highest teen birth rate in the United States at 47.3 per 1,000 live births to teens aged 15 -19, the national average is 29.4.ⁱ

- According to the OSDH's Center for Health Statistics, 15 girls between the ages of 15-19 give birth in Oklahoma *per day*.ⁱⁱ
- 30% of teen girls in the United States who drop out of high school cite pregnancy or parenthood as the reason.ⁱⁱⁱ
- In 2011, more than 75% of teen deliveries in Oklahoma were unintended pregnancies.^{iv}

Lack of educational achievement and ability to develop work skills negatively impacts wealth generation, and unexpected teen pregnancy affects many areas of state expenditures, including common and higher education, corrections, social services and the healthcare system.

It is estimated that in 2010, teen childbearing in Oklahoma cost taxpayers \$169 million.^v This figure includes public health care expenses, potential for incarceration and other negative outcomes that require intervention or assistance from the system. However, one dollar spent on reduction efforts can lead to \$3.78 in savings for taxpayers.^{vi}

The Improving Adolescent and Teen Health initiative will utilize private investments to assume the majority of financial risk to achieve health outcomes, which must have a demonstrable savings (or return on investment) to the State of Oklahoma and be documented through standardized data collection.



The \$1,000,000 appropriations request and an evidence-based awards system will allow the State Health Department, along with Oklahoma and Tulsa City- County Health Departments to partner with private entities to engage in efforts to reduce teen pregnancy. Upon successfully delivering desired results, the Department will pay a portion of expenses for the outcomes achieved and the private and public funding will be reinvested in the program for another year.

The benefits of this proposal allow for maximum results in terms of reductions in unplanned teen pregnancies at minimum expenditure by the taxpayers of Oklahoma, as well as the anticipated savings to the state's bottom line through a reduction in support services required, making it potentially a win for all Oklahoma, but especially for the potential future of Oklahoma's young women.

ⁱ http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62_09.pdf

ⁱⁱ Oklahoma State Department of Health, Center for Health Statistics, Health Care Information, Vital Statistics 2012, (<http://www.health.state.ok.us/ok2share/>)

ⁱⁱⁱ Shuger, Lisa. (2012). Teen pregnancy and high school dropout: What communities can do to address these issues.

<https://thenationalcampaign.org/resource/teen-pregnancy-and-high-school-dropout>

^{iv} Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS) (2011). Unpublished data.

[http://www.ok.gov/health/Child_and_Family_Health/Maternal_and_Child_Health_Service/Data_and_Evaluation/Pregnancy_Risk_Assessment_Monitoring_System_\(PRAMS\)/PRAMS_Data_and_Reports/](http://www.ok.gov/health/Child_and_Family_Health/Maternal_and_Child_Health_Service/Data_and_Evaluation/Pregnancy_Risk_Assessment_Monitoring_System_(PRAMS)/PRAMS_Data_and_Reports/)

^v <https://thenationalcampaign.org/sites/default/files/resource-primary-download/fact-sheet-oklahoma.pdf>

^{vi} <http://thenationalcampaign.org/sites/default/files/resource-supporting-download/getting-the-facts-straight-chapter-6-savings-to-society.pdf>

